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PART B - FEE(S) TRANSMITTAL

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Julie M. Hassell

(Depositor's name)

(Signature)

November 23, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/160,076	09/24/1998	DAVID W. SCOTT	308072000110	5918

TITLE OF INVENTION: ~~TOLEROGENIC FUSION PROTEINS OF B-LIMF GLOBULINS AND METHODS FOR INDUCING AND MAINTAINING TOLERANCE~~

CELLS EXPRESSING FUSION PROTEINS OF IMMUNOGLOBULINS

(AS AMENDED)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665 685	\$300	\$965 985	11/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILSON, MICHAEL C	1632	435-325000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

American Red Cross

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Rockville, Maryland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee
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- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1952 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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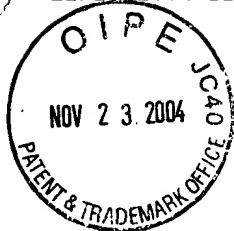
Date November 23, 2004

Typed or printed name Lisa A. Amil

Registration No. 48,199

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Comments:

Attorney Docket No. 308072000110
Group Art Unit: 1632
Examiner: M. Wilson
Serial No.: 09/160,076
Filing Date: September 24, 1998
Inventors: David W. SCOTT et al.
Title: CELLS EXPRESSING FUSION PROTEINS OF IMMUNOGLOBULINS (AS AMENDED)

Papers attached:

1. Part B - Fee(s) Transmittal + duplicate copy for fee processing (2 pages)

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